

HRSA's Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program

- Supports the [North Carolina Home Visiting Program](#) and provides voluntary, evidence-based home visiting programs for pregnant women and families with children through kindergarten entry living in communities at risk for poor maternal and child health outcomes
- Builds upon decades of scientific research showing that home visits by a nurse, social worker, early childhood educator, or other trained professional during pregnancy and in the first years of a child's life helps prevent child abuse and neglect, supports positive parenting, improves maternal and child health, and promotes child development and school readiness

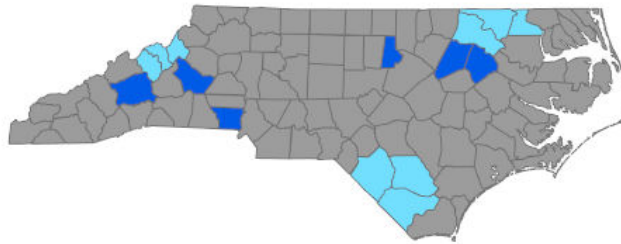
North Carolina MIECHV Program At-a-Glance

Rural counties:

Avery, Bladen, Columbus,
Halifax, Hertford, Mitchell,
Northampton, Robeson,
Yancey

Non-rural counties:

Buncombe, Burke,
Durham, Edgecombe,
Gaston, Nash



Participants

1,009

Households

561

Home Visits

7,220

North Carolina Targets Community Needs

MIECHV Program awardees serve populations in at-risk communities. Awardees tailor their programs to serve populations of need within their state. In North Carolina:

- 85.7% of households were low income
- 25.6% of households included someone who used tobacco products in the home
- 16.6% of households included a pregnant enrollee under age 21

Evidence-Based Home Visiting Models in North Carolina

[Healthy Families America \(HFA\)](#)

[Nurse-Family Partnership \(NFP\)](#)

North Carolina Performance Highlights

- **Depression Screening:** 96.4% of caregivers enrolled in home visiting were screened for depression within 3 months of enrollment or within 3 months of delivery
- **Postpartum Care:** 94.4% of mothers enrolled in home visiting received a postpartum visit with a healthcare provider within 8 weeks of delivery
- **Intimate Partner Violence (IPV) Screening:** 89.4% of caregivers enrolled in home visiting were screened for IPV within 6 months of enrollment